## Best Available Copy

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	th)	753	13-31-00
O.I.P.E. CLASSIFIER	100	16	4400
FORMALITY REVIEW	FN	64934	52700
RESPONSE FORMALITY REVIEW			

## **INDEX OF CLAIMS**

✓ Rejected	N Non-elected
= Allowed	I Interference
<ul> <li>(Through numeral) Canceled</li> </ul>	A Appeal
÷ Restricted	O Objected

÷ Restricted U Objected									
Claim	Date	Claim	Date	Claim	Date				
Final Original		Final Original		Final					
(1)		51		101					
(2)		52		102					
3		53		103					
4		54		104					
5		55		105					
6   2		56		106					
		57		107					
78		58		108					
9 =		59		109					
10		60		1 10					
11		61		111					
12		62		112					
13		63		113					
14 =		64		114					
THE		65		115					
16 \ <		66		116					
17 /		67		117					
18		68		118					
19   19		69		119					
20 7		70		120					
21		71		121					
22		72		122					
23		73		123	<del>-                                     </del>				
24		74		124					
25		75		125					
26		76	<del>   -              </del>	126					
27		77		127					
28		78		128					
29		79		129	<del>-   -   -   -   -   -   -   -   -   -  </del>				
30		80	<del>                                     </del>	130	<del></del>				
31		81		131	<del></del>				
33	<del>                                     </del>	82		132	<del>-                                     </del>				
33		83		133	<del></del>				
34		84	<del>     </del>	134	<del>                                     </del>				
35		85	<del>                                     </del>	135	<del>├╶╎╶┤</del> ╾ <del>╎</del>				
36		86	<del> - - - - - - </del>	136	<del>├─┼─┼─┼</del>				
37		87		137	<del>                                     </del>				
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	<del>                                      </del>	<del></del>	<del> - - - - - -</del>	141					
41	<del>                                     </del>	91	<del>                                     </del>		$\square$				
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43	<del>                                      </del>	93	<del></del>	143	<del></del>				
44!		94	<del>                                     </del>	144					
45	1 1 1 1 1 1 1 1	95	<del>                                     </del>	145					
46		- 96	<del>                                     </del>	146	<del></del>				
47		97		147					
48		98	<del>                                     </del>	148					
49		99		149					
50		100		150					

If more than 150 claims or 10 actions staple additional sheet here